

**S.C. Commission on Higher Education
Notification of Change in Academic Program Status**

After approval by Chief Instructional Officer,

Four- year institutions please send completed form by mail to:

Director of Academic Affairs
S. C. Commission on Higher Education
Division of Academic Affairs
1333 Main Street, Suite 200
Columbia, SC 29201

Or, fax to:

(803) 737-2297

Technical Colleges please send completed form by mail to:

Vice President of Academic Affairs
State Board for Technical & Comprehensive Education
111 Executive Center Drive
Columbia, SC 29210

1. a. Institution _____

b. Implementation date for change: _____

2. Degree awarded, major, and concentration, if applicable _____

3. Site of delivery _____

4. Mode of delivery (distance, traditional, both) and percentage of coursework offered by each mode

5. CIP Code (confirmed by CHE) _____; Site Code (assigned by CHE) _____

6. Nature of change and summary of the rationale for and objectives of the program
(Please include the number of credit hours the change entails.)

7. Curricular display: courses in the major (prefix, number, and title); information on general education and electives requirements; number of credits required for graduation

Signature of Institution's
Chief Instructional Officer

Date